

# Spinal Connection

#### **Spinal Connection**

Spinal Connection is published quarterly by the Arkansas Spinal Cord Commission.

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Spinal Connection is an official publication of the Arkansas Spinal Cord Commission. The Commission was established by Act 311 of 1975. On July 1, 2019, the Commission became a public health program under the Arkansas Department of Health as initiated by the Transformation and Efficiencies Act of 2019 (Act 910).

### From the Director - Terra Patrom

#### TEN THOUSAND and COUNTING?!!?

I recently had something brought to my attention. We apparently reached a milestone since the creation of the Act 330 of 1977.

This specific Legislative Mandate (Act 330 of 1977) provided "for the establishment and maintenance by the Arkansas Spinal Cord Commission (ASCC) of a Central Registry of Spinal Cord Disabled Persons." The Central Registry is the oldest legislatively mandated spinal cord injury registry in the country. It is also one of the most comprehensive in the number of elements of information collected, as well as the scope of spinal cord disabilities (trauma, non-trauma, and congenital).

10,001 reported cases of individuals with Spinal Cord Injury and/or Disease (SCI/D)? Twenty new cases accepted into our SCI/D Registry in the month of October pushed us to this landmark total. Seems like a big number for such a small state per capita.

On the eve of this noted landmark for the Arkansas Spinal Cord Commission SCI/D Registry, now 43 years old, I scratched my head and thought... Has our state actually reached 10,000 reported cases?!!? The reality is NO, not yet anyway.

Let me explain. Not every individual that is referred has an SCI/D. 807 individuals were inappropriate referrals that did NOT have a SCI/D. In an era where many (even healthcare professionals) are seeking means or ways to have added services, support networks, and/or assistance for disability related services, we get all kinds of

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#### TRIUMPH Help Line

1-855-767-6983

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Help & Information for Arkansans with Spinal Cord Injury & Healthcare Providers

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referrals. In the same sense, not everyone that is referred meets the medical criteria established by the ASCC for services. 355 individuals referred did NOT meet our medical criteria. Individuals must meet 3 out of 4 established medical criteria in order to be eligible for ASCC services. Some individuals may only have paralysis and/or sensory loss, yet maintain normal bowel and bladder control, or a mix of these criteria but not 3 out of the 4 medical criteria are met.

These individual numbers are immediately ruled out of the total SCI/D Registry count. This brings our total to 8,839 individuals that actively met the criteria for services with the Arkansas Spinal Cord Commission since the beginning of the SCI/D Registry.

Let's break that number down. 8,839 individuals divided by 43 years. That's an average of 188 new individuals each year (since 1977) diagnosed with an SCI/D. Some years more individuals were referred than others. At the end of the day, we still have a lot to do - no matter where or what the SCI/D Registry numbers reflect presently. Think about those words... "a lot to do" - that's a long journey. Not only for you and others we serve, but for the ASCC staff (in the past, present, and future) that take this journey with you.

## 8 Things to Know about the U.S. COVID-19 Vaccination Program



- 1. The safety of COVID-19 vaccines is a top priority.
- 2. COVID-19 vaccination will help protect you from getting COVID-19. Two doses are needed.
- 3. CDC is making recommendations for who should be offered COVID-19 vaccine first when supplies are limited.
- 4. There is currently a limited supply of COVID-19 vaccine in the United States, but supply will increase in the weeks and months to come.
- 5. After COVID-19 vaccination, you may have some side effects. This is a normal sign that your body is building protection.

- 6. Cost is not an obstacle to getting vaccinated against COVID-19.
- 7. The first COVID-19 vaccines are being used under Emergency Use Authorizations (EUA) from the U.S. Food and Drug Administration (FDA). Many other vaccines are still being developed and tested.
- 8. COVID-19 vaccines are one of many important tools to help us stop this pandemic.

Content Source: Centers for Disease Control and Prevention

Link: https://www.cdc.gov/coronavirus/2019-ncov/vaccines/8-things.html

Vaccination information for Arkansans (redirects to ADH website): tinyurl.com/arvx21

#### Welcoming Our Newest Case Manager - Makesha Washington

#### What is your background (school, career)?

I attended the University of Arkansas at Pine Bluff and received my undergraduate degree in Child and Family Development. I later received my Master of Social Work Degree from the University of Arkansas at Little Rock.

I have twenty years of experience in the social service field. In the past I have worked as a preschool teacher with children with disabilities; a Mental Health Screener providing emergency services to individuals in crisis situations; and as a case manager with teenagers that receive SSI benefits.

What led you to this field of work? I've always enjoyed the case management aspect of the social service field. I enjoy helping clients seek out resources in their community as well as empowering them to advocate for themselves.



Where did you grow up? I am from Little Rock. I grew up in the College Station Community, where I was blessed to have a lot of family around me.

**Favorite place(s) you have visited?** I visited my niece and her family in Washington State (Lacy, WA) while her husband was stationed there in 2017. It is a very beautiful and picturesque state and fortunately while I was there, it did not rain! I was able to enjoy the outdoor sports my great-nephews were involved in and the best part, there were NO BUGS!!

What are your interests and/or hobbies outside of work? I enjoy doing crafty and DIY projects. I also love using my CRICUT machine.

I am also a Founding Board Member and Board President of Carter's Crew, a nonprofit organization that has been in existence for two years. We have helped over 300 families with food and clothing giveaways, opportunity expos, referrals and advocacy. Carter's Crew mission is leave no child behind and incorporate family engagement to obtain changes in life outcomes of families living in poverty.

Thomas Kiser, MD

There are multiple medications used

to help manage the secondary complications of a spinal cord injury (SCI) and you need to weigh the benefits versus the risk of each medication with your treating physician at least yearly. As you review your medications be sure to include prescribed, over the counter (OTC) and alternative medications at each clinical visit. As your renal and liver function declines with aging a discussion should include lowering the dosages of your medication.



#### Spasticity:

- 1. Baclofen is used frequently and is considered safe for the liver. Its main side effects are drowsiness and fatigue. You should avoid suddenly stopping baclofen as this can lead to withdrawal symptoms of hallucinations and mental status changes. Baclofen should always be tapered if you have to stop it for any reason.
- 2. Tizanidine also causes drowsiness, but the main issue to avoid is a drug interaction with the antibiotics ciprofloxacin or levofloxacin, which can lead to a heart arrhythmia. If you are prescribed either ciprofloxacin or levofloxacin you need to stop taking tizanidine during the period, you are using either antibiotic.
- 3. Dantrium can make you weaker and can cause liver side effects, so and if you are using this medication you need to have your liver enzymes checked at least yearly. If you are having any signs of a new side effect or new illness while on dantrium, you need to check your liver enzymes to ensure the dantrium is not damaging your liver. The liver side effects are reversible and will resolve if caught early, and the medication is stopped.



4. Diazepam or clonazepam, which are both benzodiazepines, are sedating and very addictive. I use benzodiazepines very rarely to manage spasticity as I feel the long-term side effects are too risky, and we have much better medications and treatment options with less risk. Once you are on a benzodiazepine it is very difficult to stop, especially if you have been using it for over 2-3 years. The side effects outweigh any intended benefits.

5. Muscle relaxers such as metaxalone, cyclobenzaprine, and robaxin can be relaxing and sedating, but generally do not help the spasticity associated with a SCI. Avoid the use of carisoprodol as it transitions to the active metabolite, meprobamate, which is a weak narcotic, with all the side effects, minimal benefit and the high potential for abuse and addiction.

#### Neurogenic bladder:

1. Muscarinic antagonists (oxybutynin, solifenacin, trospium, etc.) help manage bladder spasms and leakage and are associated with cognitive and constipation side effects. Long term use has been associated with an increased risk of dementia. However, they can be used safely if you have no family history of dementia, you use the minimally effective dose, and you take other measures to address the risk of dementia (maintain a healthy life style, stop smoking, minimize alcohol use, and stay cognitively active). However, if you are concerned and consider yourself at a higher risk of dementia, there are other options to manage bladder

### Our sincere condolences to the friends and family of...

Rufus B. Jones 06/10/20 Gregory A. Williams 06/19/20 Gary S. Lloyd 07/21/20 Fran Devito 09/08/20 Dewey Townsend 09/16/20 William B. Bennett 09/27/20 Courtney D. Laster 09/28/20 Sterlin Wallace III 10/01/20 Phyllis Ables 10/04/20 Linene M. Reed 10/06/20 Willie J. Pressley 10/12/20 Gary Torrence 10/17/20 Tyler Conrad 10/19/20 Velma Finley 10/20/20 Eugene Boykin 11/11/20 Suzan R. Hicks 11/14/20 Ralph Ruby 11/23/20 Thomas Blake Wright 11/26/20 Paul K. Moore 12/01/20 Danny Pennington 12/11/20

spasms, such as the use of a newer generation medication, the Beta3 agonist, mirabegron, whose main side effect is an increase in blood pressure.

This is a short list of common medications and their side effects, my hope is that by laying out the common benefits and risks, you will be better able to discuss your medications with your physician and recognize medication issues when they happen to you.

Look for Part 2 of this article in our next quarterly edition of the Spinal Connection newsletter!

From all of us at the Arkansas Spinal Cord Commission, we wish you and your family a **Happy New Year!** 

"We spend January 1st walking through our lives, room by room, drawing up a list of work to be done, cracks to be patched.

Maybe this year, to balance the list, we ought to walk through the rooms of our lives...not looking for flaws, but for potential."

-Ellen Goodman







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- Grants, Scholarships, & Fundraisers
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